



**Testimony for Public Hearing
Joint Committee on Insurance and Real Estate
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SB 206, An Act Authorizing Pregnancy as a Qualifying Event for Special Enrollment Periods for Certain Individuals.

Chairs and members of the Public Health Committee, I write in support of SB 206. In 2014 an organization called Young Invincibles highlighted the need for maternity care coverage to be available to people who had unintended pregnancies and found themselves without coverage for maternity care.ⁱ This report details some of the complications that can cause uninsured patients to end up with significant costs from pregnancies, the health conditions that can be caused or exacerbated by pregnancy when patients do not have regular medical care, and the potential benefits to infant health. Similarly, the Guttmacher Institute recently highlighted the fact that the United States has a relatively high level of maternal mortality, particularly for black women, and that over 23,000 U.S. infants die within their first 12 months.ⁱⁱ Clearly access to maternity care is important for maternal health, infant health, and preventing women from falling into debt because of unintended pregnancies that are not covered by insurance.

Providing a special enrollment period for women who become pregnant and who are uninsured or who have insurance that does not cover pregnancy is one way to try to fill gaps in our current provision for maternity care. In 2015, the Young Invincibles organization asked the federal department of Health and Human Services (HHS) to include a special enrollment period for pregnancy under the current federal Affordable Care Act (ACA) statutes and argued that states should also look at this policy. The rationale for why this was needed highlighted a, at that time shrinking, group of individuals who were mostly insured, and yet lacked access to maternity coverage. The issue as raised in 2014/5 was not just one of not accessing insurance, but of accessing plans that covered the mandated benefits of the ACA. Types of insurance that sometimes do not cover maternity benefits include plans grandfathered in under the ACA, and young people covered as dependents on plans where, due to a loophole in the requirements of the ACA, the plan does not cover maternity care for workers' non-spouse dependents. A study by the National Women's Law Center looking at ACA violations in 2014 and 2015 found that there were instances where insurers violated the ACA and did not provide maternity coverage in plans in nine different states, but Connecticut was not one of these.ⁱⁱⁱ

The aim of the ACA was to remove such coverage gaps. Either through a plan that is required to cover mandated essential health benefits (including maternity care) or through eligibility for the expanded Medicare program, the law significantly reduced the uninsured population. In this context, the special enrollment period for pregnancy is straightforward. A small category of individuals can find themselves unable to access maternity coverage through the healthcare options available to them. A special enrollment period for pregnancy then allows these

individuals access to insurance that covers maternity care, improving children's and women's health, with little cost to other consumers since so few people would be buying plans in this manner.

However, since the policy recommendations of 2015 for this legislation, the state of the ACA has changed. In an unstable market, premiums have risen substantially. The individual mandate has been repealed at the federal level, and unless a similar measure is enacted in Connecticut this year, many young, healthy, individuals may start to opt to risk going without health insurance because of the cost of plans. If insurers use this policy as a reason to raise rates for policies still further, the end result may be that even more people risk going without insurance because of the cost of even a high-deductible plan. As an organization, we fully support the general principle of this legislation and the underlying reasoning for creating a special enrollment period for pregnancy. However, caution must be exercised as we move forward to make sure that this is not a policy that ends up raising rates for plans by so much that more people may drop insurance than gain it, particularly since expensive plans, even with a special enrollment period, may be out of reach to precisely the kinds of people who will need them the most.

ⁱ Postolowski, Christina. 2014. Maternity Coverage: The Need for Special Enrollment in the Health Insurance Marketplaces During Pregnancy. *Young Invincibles*. Accessed at: http://younginvincibles.org/wp-content/uploads/2017/05/Without-Maternity-Coverage-1.5.15_4.pdf

ⁱⁱ Sonfield, Adam. 2017. No One Benefits if Women Lose Coverage for Maternity Care. Guttmacher Policy Review. Accessed at: <https://www.guttmacher.org/gpr/2017/06/no-one-benefits-if-women-lose-coverage-maternity-care>

ⁱⁱⁱ National Women's Law Center. 2015. *State of Women's Coverage: Health Plan Violations of the Affordable Care Act*. Accessed at: <https://nwlc-ciww49tixgw5lbbab.stackpathdns.com/wp-content/uploads/2015/04/stateofwomenscoverage2015final.pdf>